

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

Fairbanks Versus the Congressman for All Alaska

(b) Address (number and street) ☐ check if different than previously reported
3875 Geist Rd., Suite E, PMB# 175(c) City, State and ZIP Code
Fairbanks

AK

99709

2. FEC Identification Number

C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement

☒

New

or

☐

Amended

4. Covering Period

M M / D D / Y Y Y Y
10 / 17 / 2008

through

M M / D D / Y Y Y Y
10 / 17 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y (b) Communication Title Radio Ads

6. The filer is a(n): (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☐ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☐ Other, specify: _____

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☐No ☐

8. Custodian of Records

(a) Name

Margaret W. Eagleton

(b) Address (number and street)

93 Roxie Rd.

(c) City, State and ZIP Code

Fairbanks

AK

99709

(d) Name of Employer or Principal Place of Business

Fairbanks North Star Borough

(e) Occupation

substitute library grant (page)

9. Total Donations This Statement

2925.00

10. Total Disbursements/Obligations This Statement

4096.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Margaret W. Eagleton

SIGNATURE Electronically Filed by Margaret W. EagletonDATE 10/17/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.